

Wisconsin Division of Safety and Buildings Wisconsin Stats. 101.63, 101.73	Wisconsin Uniform Building Permit Application Instructions on back of second ply. The information you provide may be used by other government agency programs [(Privacy Law, s. 15.04 (1)(m))]	Application No. Parcel No.																								
PERMIT REQUESTED																										
<input type="checkbox"/> Constr. <input type="checkbox"/> HVAC <input type="checkbox"/> Electric <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Control <input type="checkbox"/> Other:																										
Owner's Name	Mailing Address	Tel.																								
Contractor Name & Type	Lic/Cert#	Mailing Address																								
Dwelling Contractor (Constr.) must list builder or self																										
Dwelling Contr. Qualifier	The Dwelling Contr. Qualifier shall be an owner, CEO, COB or employee of the Dwelling Contr.																									
HVAC																										
Electrical																										
Plumbing																										
PROJECT LOCATION	Lot area	<input type="checkbox"/> One acre or more of soil will be disturbed <input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City of Liberty																								
Building Address Same	County Outagamie	Subdivision Name 1/4, 1/4, of Section __, T 22 N, R 15 E/W																								
Zoning District(s)	Zoning Permit No.	Setbacks: Front ft. Rear ft. Left ft. Right ft.																								
1. PROJECT	3. OCCUPANCY	6. ELECTRIC																								
<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Alteration <input type="checkbox"/> Raze <input type="checkbox"/> Addition <input type="checkbox"/> Move <input type="checkbox"/> Other:	<input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Garage <input type="checkbox"/> Other:	Entrance Panel Amps: _____ <input type="checkbox"/> Underground <input type="checkbox"/> Overhead																								
2. AREA INVOLVED (sq ft)	4. CONST. TYPE	7. WALLS																								
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Size</th> <th>Unit 1</th> <th>Unit 2</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Unfin. Bsmt</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Living Area</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Garage</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Deck/ Porch</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Totals</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Size	Unit 1	Unit 2	Total	Unfin. Bsmt				Living Area				Garage				Deck/ Porch				Totals				<input checked="" type="checkbox"/> Site-Built <input type="checkbox"/> Mfd. per WI UDC <input type="checkbox"/> Mfd. per US HUD	<input type="checkbox"/> Wood Frame <input type="checkbox"/> Steel <input type="checkbox"/> ICF <input type="checkbox"/> Timber/Pole <input type="checkbox"/> Other:
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Totals																										
	5. STORIES	8. USE																								
	<input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other: <input type="checkbox"/> Plus Basement	<input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other:																								
		9. HVAC EQUIP.																								
		<input type="checkbox"/> Furnace <input type="checkbox"/> Radiant Basebd <input type="checkbox"/> Heat Pump <input type="checkbox"/> Boiler <input type="checkbox"/> Central AC <input type="checkbox"/> Fireplace <input type="checkbox"/> Other:																								
		10. SEWER																								
		<input type="checkbox"/> Municipal <input type="checkbox"/> Sanitary Permit# _____																								
		11. WATER																								
		<input type="checkbox"/> Municipal <input type="checkbox"/> On-Site Well																								
		12. ENERGY SOURCE																								
		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Fuel</th> <th>Nat Gas</th> <th>LP</th> <th>Oil</th> <th>Elec</th> <th>Solid</th> <th>Solar Geo</th> </tr> </thead> <tbody> <tr> <td>Space Htg</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Water Htg</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table>	Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar Geo	Space Htg	<input type="checkbox"/>	Water Htg	<input type="checkbox"/>													
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		13. HEAT LOSS																								
		_____ BTU/HR Total Calculated Envelope and Infiltration Losses (available from "Total Building Heating Load" on Rescheck report)																								
		14. EST. BUILDING COST w/o LAND must have a listed value																								
		\$ _____																								
I understand that I: am subject to all applicable codes, laws, statutes and ordinances, including those described on the reverse side of the last ply of this form; am subject to any conditions of this permit; understand that the issuance of this permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. If one acre or more of soil will be disturbed, I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management and the owner shall sign the statement on the back of the permit if not signing below. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done. <input type="checkbox"/> I vouch that I am or will be an owner-occupant of this dwelling for which I am applying for an erosion control or construction permit without a Dwelling Contractor Certification and have read the cautionary statement regarding contractor responsibility on the reverse side of the last ply of this form.																										
APPLICANT sign _____	(Print:)	DATE _____																								
APPROVAL CONDITIONS	This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. <input type="checkbox"/> See attached for conditions of approval.																									
ISSUING JURISDICTION	xTown of <input type="checkbox"/> County of <input type="checkbox"/> State→ Liberty Outagamie	State-Contracted Inspection Agency#: _____ Municipality Number of Dwelling Location _____																								
FEES:	PERMIT(S) ISSUED	WIS PERMIT SEAL #																								
Plan Review \$ _____ Inspection \$ _____ Wis. Permit Seal \$ _____ Remodel \$ _____ Total \$ _____	<input type="checkbox"/> Construction <input type="checkbox"/> HVAC <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Control	PERMIT ISSUED BY: Name Larry Preuss Date _____ Tel. _____ Cert No. _____																								